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| SERIAL NUMBER 09/929,226 | FILING OR 371(c) DATE 08/13/2001 RULE | CLASS 083 | GROUP ART UNIT 3724 | ATTORNEY DOCKET NO. SDT 312 |
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APPLICANTS
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**** CONTINUING DATA *******
 This appln claims benefit of 60/225,056 08/14/2000
 and claims benefit of 60/225,057 08/14/2000
 and claims benefit of 60/225,058 08/14/2000
 and claims benefit of 60/225,059 08/14/2000
 and claims benefit of 60/225,089 08/14/2000
 and claims benefit of 60/225,094 08/14/2000
 and claims benefit of 60/225,169 08/14/2000
 and claims benefit of 60/225,170 08/14/2000
 and claims benefit of 60/225,200 08/14/2000
 and claims benefit of 60/225,201 08/14/2000
 and claims benefit of 60/225,206 08/14/2000
 and claims benefit of 60/225,210 08/14/2000
 and claims benefit of 60/225,211 08/14/2000
 and claims benefit of 60/225,212 08/14/2000

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
**** 09/14/2001**

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|---|---|----------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY OR | SHEETS DRAWING 6 | TOTAL CLAIMS 10 | INDEPENDENT CLAIMS 3 |
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Verified and Acknowledged _____
 Examiner's Signature _____ Initials _____

ADDRESS
 27630

TITLE
 CUTTING TOOL SAFETY SYSTEM

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| FILING FEE RECEIVED 655 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
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